PTO/SB/17 (10-08) Approved for use through 06/30/2010, OMB 0651-0032

longer the Pape	rwork Reduction Act of	of 1995 no pen	sons are required to re	espond to a collect	ion of inform	nation unless it di	s. DEPARTMENT OF Contisplays a valid OMB cont	Irol number
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Application Nu	umber	10/578,042		
		Filing Date		04/12/2007				
		First Named In	nventor	Tobias Rasm				
Applicant	claims small entity	etatus See	27 CED 1 27	Examiner Nam	ne	Jose V. Chen		
		T	37 CFR 1.21	Art Unit		3637		
TOTAL AMOU	NT OF PAYMENT	(\$)	1110.00	Attorney Dock	et No.	150-344		
METHOD OF	METHOD OF PAYMENT (check all that apply)							
Check	✓ Credit Card	Money	Order Non	ne Other	(please ide	ntify):		
For the	above-identified de	posit account	, the Director is her	eby authorized t	to: (check	all that apply)		
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	nder 37 CFR 1.16 a	and 1.17	-				m. Provide credit card	
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FEE CALCUL								
1. BASIC FILE	ING, SEARCH, A							
		ING FEES Small Er	SEAR	CH FEES Small Entity	EXAM	INATION FEE		
<u>Application</u>	Type Fee	(\$) <u>Fee (</u> \$			Fee (Small Entity (\$) Fee (\$)	Y <u>Fees Paid (</u>	(\$)
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		_
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		<u> </u>
Provisional	220	110	0	0	0	0		
2. EXCESS C Fee Descript	<u>ion</u>					Fee (\$)	Small Entity Fee (\$)	
Each claim	over 20 (includia	ng Reissues) Doi:10.1001			52	26	
	endent claim ove	r 3 (Includii	ng Keissues)			220 390	110 195	İ
Total Claims	•	Claims	Fee (\$) Fee	Paid (\$)			193 Dependent Claims	
	20 or HP =	x				Fee (\$)		
HP = highest nu Indep. Claims	umber of total claims p	aid for, if greate Claims		Paid (\$)				
-:	3 or HP =	x	=	raiu (\$)				_
	mber of independent of	laims paid for,	if greater than 3.					
If the specific	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings ut	nder 37 CFR 1.52	2(e)), the approximation	plication size fee	due is \$270 (\$	\$135 for s	small entity) f	for each additional	50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
	4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							aid (\$)
Other (e.g., late filing surcharge): 3 Month EOT 1110.00								
SUBMITTED BY								
Signature	7/	- 7 .	Do - ME LR	Registration No.	25 246	Telep	hone 202-828-9299	
Name (Print Type)	Steven S. Payne					Date	08/27/2009	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	Application Number	10/578,042			
TRANSMITTAL	Filing Date	04/12/2007			
FORM	First Named Inventor	Tobias Rasmusson			
FORM	Art Unit	3637			
to be used for all correspondence after initial filing)	Examiner Name	Jose V. Chen			
otal Number of Pages in This Submission	Attorney Docket Number	150-344			

Tot	al Number o	of Pages in	This Submission		Taxonia y Booker 14	150-344			
ENCLOSURES (Check all that apply)									
	Amendm A A Extension	ee Attack ent/Repl fter Final ffidavits/ n of Time	hed		Drawing(s) Licensing-related Paper Petition Petition to Convert to Provisional Application Power of Attorney, Rechange of Corresport Terminal Disclaimer Request for Refund CD, Number of CD(s)	a on evocation idence Address		Appe of Ap Appe (Appe Propr	Allowance Communication to TC al Communication to Board peals and Interferences al Communication to TC al Notice, Brief, Reply Brief) ietary Information s Letter Enclosure(s) (please Identify '):
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Signati	ure	W.		5. 4	Jan-				
Printed	Printed name Steven S. Payne								
Date 08/27/2009			Reg. No. 35,316						
CERTIFICATE OF TRANSMISSION/MAILING									
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Typed	or printed r	name	Steven S. Payne		•			Date	08/27/2009

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